

This sheet is not part of and does not count as a sheet of the international application.

**PCT**

**FEE CALCULATION SHEET**  
**Annex to the Request**

For receiving Office use only

International Application No.

Applicant's or agent's  
file reference

062002-2940

Date stamp of the receiving Office

Applicant

GEORGIA TECH RESEARCH CORPORATION et al.

**CALCULATION OF PRESCRIBED FEES**

1. TRANSMITTAL FEE .....

300.00 **T**

2. SEARCH FEE .....

1,000.00 **S**

International search to be carried out by **US**

(If two or more International Searching Authorities are competent to carry out the international search, indicate the name of the Authority which is chosen to carry out the international search.)

3. INTERNATIONAL FILING FEE

Where item (b) and/or (c) of Box No. IX apply, enter Sub-total number of sheets

} 45

Where item (b) and (c) of Box No. IX do not apply, enter Total number of sheets

**i1** first 30 sheets

1,211.00 **i1**

**i2** **15** x **13.00** = **195.00 **i2****  
number of sheets in  
excess of 30 fee per sheet

**i3** additional component (only if sequence listing and/or tables related thereto are filed in computer readable form under Section 801(a)(i), or both in that form and on paper, under Section 801(a)(ii)):

400 x \_\_\_\_\_ = **i3**  
fee per sheet

Add amounts entered at **i1**, **i2** and **i3** and enter total at **I** 1,406.00 **I**

(Applicants from certain States are entitled to a reduction of 75% of the international filing fee. Where the applicant is (or all applicants are) so entitled,

4. FEE FOR PRIORITY DOCUMENT (if applicable) 40.00 **P**

5. TOTAL FEES PAYABLE 2,746.00

Add amounts entered at **T**, **S**, **I** and **P**, and enter total in the **TOTAL** box

**MODE OF PAYMENT**

authorization to charge  
deposit account (see below)

postal money order

cash

coupons

cheque

bank draft

revenue stamps

other (specify): Credit Card

**AUTHORIZATION TO CHARGE (OR CREDIT) DEPOSIT ACCOUNT**

(This mode of payment may not be available at all receiving Offices)

Authorization to charge the total fees indicated above.

Receiving Office: **US**

(This check-box may be marked only if the conditions for deposit accounts of the receiving Office so permit) Authorization to charge any deficiency or credit any overpayment in the total fees indicated above.

Deposit Account No.: **20-0778**

Authorization to charge the fee for priority document.

Date: **15 March 2005**

Name: **Charles W. Griggers**

Signature: 